

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|--------------|----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>mdy</i> | <i>16080</i> | <i>3/15/02</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

| Claim | Date |
|----------------|------|
| Final Original | |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| 148 | |
| 149 | |
| 150 | |

If more than 150 claims or 10 actions
 staple additional sheet here

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